

CHAPTER 5

RECEIVING SERVICES

Children diagnosed with a Pervasive Developmental Disorder can receive EIBI services through the PDD Waiver Program or the PDD State Funded Program.

PDD Waiver Program

If a child meets the target population criteria (i.e. be ages 3 through 10 years, diagnosed with a PDD by age eight years, meet Medicaid financial criteria or provide documentation of financial ineligibility for Medicaid, and meets ICF/MR Level of Care medical criteria as determined by the DDSN Consumer Assessment Team for this program), the child may be enrolled in the PDD Waiver Program to receive EIBI services if funding is available. Once enrollment has been verified, the following should occur:

1. The Service Coordination Supervisor will authorize Case Management by completing the **Authorization for PDD Waiver Case Management Services (Form PDD 11)**.
2. The Service Coordinator will:
 - Enter budget data for Case Management as indicated in the **PDD Waiver/State Program Automated Budget Process (Appendix 1)**.
 - Provide the parent/legal guardian with information on all EIBI qualified providers working in the parent/legal guardian's area.
 - Provide the parent/legal guardian with information on the Responsible Party option.
3. Once the parent/legal guardian has selected an EIBI provider, the Service Coordinator will determine if the child needs a Full EIBI Assessment, a Partial EIBI Assessment, or if the child has a current assessment that can be used by the provider.

If the child has an assessment that is less than three (3) months old, the Service Coordinator will forward a copy of the assessment to the District Autism Staff. The District Autism Staff will determine if the assessment can be used by the provider or if a partial assessment is needed. Once the determination is made, the District Autism Staff will inform the child's Service Coordinator so the child's Service Plan and budget can be updated.

- If the child has not had an EIBI assessment or needs a partial assessment, the Service Coordinator will:
 - a. Update the child's Service Plan to include the need for an EIBI Assessment.

- b. Authorize the full or partial assessment by completing the Annual Assessment portion of the **Authorization for EIBI PDD Waiver Services (PDD Form 12)**. Once completed this document must be faxed to the EIBI provider selected by the parent/legal guardian. The assessment should be completed in a timely manner. During their monthly contact, if the Service Coordinator does not see evidence of progress towards completion of the assessment, the Service Coordinator will inform the family of other EIBI providers and, suggest that the family consider selecting another provider who can render the service more quickly.
 - c. Update the child's budget data as indicated in the **PDD Waiver/State Program Automated Budget Process (Appendix 1)** to reflect the type of assessment authorized.
- Once the assessment is completed, the provider will send a copy to the child's Service Coordinator and the District Autism Staff.
- The District Autism Staff will have five (5) working days to:
 - a. Review the assessment and determine the number of Line Therapy hours that will be authorized for EIBI services.
 - b. Update the child's budget data as indicated in the **PDD Waiver/State Program Automated Budget Process (Appendix 1)**.
- Once the child's budget data has been updated by the District Autism Staff indicating the number of Line Therapy hours, the Service Coordinator will have five (5) working days to:
 - a. Update the child's Service Plan to reflect EIBI services.
 - b. Authorize Plan Implementation, EIBI Lead Therapy and EIBI Line Therapy for the child by completing the corresponding portions of the **Authorization for EIBI PDD Waiver Services (PDD Form 12)**. Once completed this document must be faxed to the EIBI provider selected by the parent/legal guardian.
- The Service Coordinator will be responsible for monitoring the EIBI services provided as stipulated in Chapter 10, Case Manager Responsibilities.
- To receive payment for PDD Waiver EIBI services, EIBI service providers will maintain documentation of services and bill South Carolina Medicaid as per established billing procedures. The provider may use the **Early Intensive Behavioral Intervention Service Reporting Document (PDD Form 18)** to document services being direct billed to South Carolina Medicaid.

- If the parent/legal guardian chooses the Responsible Party option, the Service Coordinator will provide them with all necessary forms as outlined in Chapter 9, the Responsible Party chapter of this manual.

PDD State Funded Program

If a child does not meet ICF/MR Level of Care, but meets all other eligibility requirements, the child may be enrolled in the PDD State Funded Program to receive EIBI services if funding is available. Once enrollment has been verified, the following should occur.

1. The Service Coordinator will:

- Up date the child's budget data as indicated in the **PDD Waiver/State Program Automated Budget Process (Appendix 1)**. No service authorization is necessary for children enrolled in the PDD State Funded Program. Case Management for children enrolled in the PDD State Funded Program is regular Targeted Case Management. The Service Coordination Provider will be paid through the current Non-Capitated Service Coordination or the QPL payment process. Service Coordinators will report Service Coordination services through the regular automated Service Provision Logs (SPL's).
- Provide the parent/legal guardian with information on all EIBI qualified providers working in the parent/legal guardian's area.
- Provide the parent/legal guardian with information on the Responsible Party option.

2. Once the parent/legal guardian has selected an EIBI provider, the Service Coordinator will determine if the child needs a Full EIBI Assessment, a Partial EIBI Assessment, or if the child has a current assessment that can be used by the provider.

If the child has an assessment that is less than three (3) months old, the Service Coordinator will forward a copy of the assessment to the District Autism Staff. The District Autism Staff will determine if the assessment can be used by the provider or if a partial assessment is needed. Once the determination is made, the District Autism Staff will inform the child's Service Coordinator so the child's Service Plan and budget can be updated.

- If the child has not had an EIBI assessment or needs a partial assessment, the Service Coordinator will:
 - a. Update the child's Service Plan to include the need for an EIBI Assessment.
 - b. Update the child's budget data as indicated in the **PDD Waiver/State Program Automated Budget Process (Appendix 1)**.
 - c. Authorize a full assessment by completing the Annual Assessment portion of the **Authorization for EIBI PDD State Funded Program Services (PDD Form 13)**. Once completed this document must be faxed to the EIBI provider

selected by the parent/legal guardian. Providers should complete the assessment in a timely manner. During their monthly contact, if the Service Coordinator does not see evidence of progress towards completion of the assessment, the Service Coordinator will inform the family of other EIBI providers and, suggest that the family consider selecting another provider who can render the service more quickly.

- Once the assessment is completed, the provider will send a copy to the child's Service Coordinator and the District Autism Staff.
- The District Autism Staff will have five (5) working days to:
 - a. Review the assessment and determine the number of Line Therapy hours that will be authorized for EIBI services.
 - b. Update the child's budget data as indicated in the **PDD Waiver/State Program Automated Budget Process (Appendix 1)**.
- Once the child's budget data has been updated by the District Autism Staff indicating the number of Line Therapy hours, the Service Coordinator will have five (5) working days to:
 - a. Update the child's Service Plan to reflect EIBI services.
 - b. Authorize Plan Implementation, EIBI Lead Therapy and EIBI Line Therapy for the child by completing the corresponding portions of the **Authorization for EIBI PDD State Funded Program Services (PDD Form 13)**. Once completed this document must be faxed to the EIBI provider selected by the parent/legal guardian.
- The Service Coordinator will be responsible for monitoring the EIBI services provided as stipulated in Chapter 10, Case Manager Responsibilities.
- To receive payment for State Funded EIBI services, EIBI service providers will send invoices (invoiced to SCDDSN) along with the **Early Intensive Behavioral Intervention Service Reporting Document (PDD Form 18)** to SCDDSN Central Office – Cost Analysis Division and the Service Coordinator.
- The Cost Analysis Division will process payment directly to the EIBI service provider and update the manual PDD State Funded Program tracking system as to delivered service units.

PDD Program Renewal

If, at the end of their initial year of receiving services through the PDD Program, a child continues to meet the criteria for participation in the program, it will be the Service Coordinator's responsibility to

complete the necessary documents for the child to continue receiving PDD services. The procedures followed and the forms used for the initial authorization of services should also be used for subsequent authorizations.

As indicated in Chapter Four under Level of Care Determination, the Consumer Assessment Team must complete the annual LOC for PDD Program participants. The Annual LOC request should be received by the Consumer Assessment Team at least six weeks prior to the LOC Expiration Date.

Disenrollment

It will be necessary to disenroll children from the PDD Program for various reasons. In all cases, a Notice of Disenrollment must be completed. For waiver recipients use the **PDD Waiver Notice of Disenrollment (PDD Form 17-A)** and for non waiver recipients use the **PDD State Funded Notice of Disenrollment (PDD Form 17-B)**.

When disenrolling a child, the Service Coordinator/Early Interventionist must complete the appropriate Notice of Disenrollment by entering the basic identifying information and checking the box that corresponds with the reason for disenrollment. The effective date of disenrollment will be ten (10) calendar days from the date that the form is completed (e.g. the Service Coordinator/Early Interventionist completes the form on December 2nd means the effective date of disenrollment would be December 12th). Once the form is completed, the following should occur:

- For children in the PDD Waiver: the original **PDD Waiver Notice of Disenrollment (PDD Form 17-A)**, including the **SCDDSN Reconsideration Process and SCDHHS Medicaid Appeals Process (PDD Form 31-A)** must be sent to the child's parent/legal guardian/Responsible Party. Copies must be sent to the Waiver Enrollments Coordinator, the Regional DHHS Medicaid Eligibility Worker, Debra Leopard in Cost Analysis, and a copy maintained in the child's file.
- For children in the PDD State Funded Program: the original **PDD State Funded Notice of Disenrollment (PDD Form 17-B)**, including the **PDD State Funded Program Reconsideration/Appeals Process (PDD Form 31-B)** must be sent to the child's parent/legal guardian/Responsible Party. Copies must be sent to the Waiver Enrollments Coordinator, Debra Leopard in Cost Analysis, and a copy maintained in the child's file.

The following reasons do not require a ten (10) calendar day notice:

- Loss of Medicaid eligibility
- Death
- Recipient moves out of state
- Recipient is admitted to an ICF/MR or Nursing Facility
- Recipient has been in a hospital/nursing facility in excess of thirty (30) consecutive days

Termination of EIBI Services

If EIBI services are terminated for reasons other than at the request of the child's parent/legal guardian/Responsible Party, the child's parent/legal guardian/Responsible Party must be given written notice to include the details regarding the termination of services, allowance for appeal/reconsideration, and a ten (10) calendar day waiting period before proceeding with the termination (when applicable). The child's parent/legal guardian/Responsible Party will be provided an opportunity for a fair hearing prior to any action being taken.

If the child's services are scheduled to be terminated, the Service Coordinator/Early Interventionist is responsible for completing the appropriate Notice of Termination of Service. The services that are scheduled to be terminated should be indicated on the form along with the reason and comments to support that reason. The effective date for termination will be ten (10) calendar days from the date that the form is completed, which allows the parent/legal guardian/Responsible Party ten (10) calendar days notice prior to termination of the service and the opportunity to appeal that decision prior to termination. If the child's parent/legal guardian/Responsible Party appeals the decision within 10 days of the notification, then the parent/legal guardian/Responsible Party may choose to have the services uninterrupted while awaiting the outcome of the appeal. However, if the appeal is upheld, then the parent/legal guardian/Responsible Party will be liable for payment of those services.

Once the form is completed, the following should occur:

- For PDD Waiver recipients: the original **PDD Waiver Notice of Termination of Services (PDD Form 16-A)**, including the **SCDDSN Reconsideration Process and SCDHHS Medicaid Appeals Process (PDD Form 31-A)** must be sent to the recipient's parent/legal guardian/Responsible Party. Copies must be sent to the Waiver Enrollments Coordinator, Debra Leopard in Cost Analysis, the District Autism staff, and a copy maintained in the recipient's file.
- For PDD State Funded recipients: the original **PDD State Funded Program Notice of Termination of Services (PDD Form 16-B)**, including the **PDD State Funded Program Reconsideration/Appeals Process (PDD Form 31-B)** must be sent to the recipient's parent/legal guardian/Responsible Party. Copies must be sent to the Waiver Enrollments Coordinator, Debra Leopard in Cost Analysis, the District Autism staff, and a copy maintained in the recipient's file.

The following reasons do not require a ten (10) calendar day notice:

- Loss of Medicaid eligibility
- Death
- Recipient moves out of state
- Recipient is admitted to an ICF/MR or Nursing Facility
- Recipient has been in a hospital/nursing facility in excess of thirty (30) consecutive days

If the child's parent/legal guardian/Responsible Party desire to change EIBI providers, they may request that services with the current provider be terminated. If this occurs, services with the current provider must be terminated using the appropriate form. A copy of this document must be sent to the

Waiver Enrollment Coordinator, Debra Leopard in Cost Analysis, the District Autism staff, and a copy maintained in the recipient's file. Appeals information is not necessary when terminations are requested by parents. Once a new provider is selected by the child's parent/legal guardian/Responsible Party, the Service Coordinator should re-authorize services using the appropriate forms and authorization process.

Non-Signature Declinations

There may be occasions when a PDD case requires closure (e.g. family moved out-of-state, parent/legal guardian has been non-responsive), but the Service Coordinator or Early Interventionist is unable to obtain the signature of the child's parent/legal guardian. Before the PDD Waiver Enrollment Coordinator will close the case, the child's SC/EI should assure that the following has occurred:

- The child's case file contains specific dates when the SC/EI tried to contact the family. Notes should indicate if a message was left or a conversation with the parent took place. The SC/EI should ensure that calls are made on multiple days at varying times and during times the file indicate someone would typically be at home.
- After several telephonic correspondences to no avail, the child's record should reflect that a certified, return receipt letter was sent. The content of the letter should clearly explain what issues need to be resolved. A copy of this letter should be in the child's file.
- If, after the above attempts, there is no response from the parent, the SC/EI should send a second certified, return receipt letter clearly explaining what issues need to be resolved, a copy of the appropriate appeals process, and a statement that the case will be closed in the next 10 (ten) days if no appropriate response is received.

If the above steps have been taken, the **Statement of Individual Declining Waiver Services (PDD Form 20)** can be processed without a parent/legal guardian signature.